Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the SEC 19724 (6-02)form displays a currently valid OMB control number.

#### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption state exemption unless such exemption is predicated on the filing of a federal notice.

> UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

> > FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL OMB Number: 3235-0076 Expires: April 30, 2008

Estimated average burden hours per response.. . 1

SEC USE ONLY			
Prefix		Serial	
DATE RECEIVED			

Name of Offering ([] check if this is an amendment and name has changed, and indicate change.) [ ] ULOE [ ] Rule 504 [ ] Rule 505 [x] Rule 506 [ ] Section 4(6) Filing Under (Check box(es) that apply): Type of Filing: [X] New Filing [] Amendment INVENTURE CHEMICAL, INC. 1. Enter the information requested about the issuer Name of Issuer ([ ] check if this is an amendment and name has changed, and indicate change.) Telephone Number (Including Area Code) Address of Executive Offices (Number and Street, City, State, Zip Code) (253) 576-1577 2244 Port of Tacoma Road, Tacoma, WA 98401 Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (if different from Executive Offices) Brief Description of Business Biofuel development and processing Type of Business Organization [ ] other (please specify): [ ] limited partnership, already formed [X] corporation [ ] limited partnership, to be formed [ ] business trust Month Year [x ] Actual [ ] Estimated Actual or Estimated Date of Incorporation or Organization: [ 0][5 ] [0 ][7 ]

#### **GENERAL INSTRUCTIONS**

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6). When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

CN for Canada; FN for other foreign jurisdiction) [W][A]

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of

manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

### A. BASIC IDENTIFICATION DATA

# 2. Enter the information requested for the following:

- Each promoter of the issuer, if the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
- Each general and managing partner of partnership issuers.

Check Box(es) that Apply: [X] Promoter [X] Beneficial Owner [X] Executive Officer [X] Director [] General and/or Managing Partner
Full Name (Last name first, if individual): Tegen, Mark
Business or Residence Address (Number and Street, City, State, Zip Code): 2244 Port of Tacoma Road, Tacoma, WA 98401
Check Box(es) that [X] Promoter [X] Beneficial Owner [X] Executive Officer [ ] Director [ ] General and/or Apply:  Managing Partner
Full Name (Last name first, if individual): Process Technology Associates, LLC
Business or Residence Address (Number and Street, City, State, Zip Code): 2244 Port of Tacoma Road, Tacoma, WA 98401
Check Box(es) that Apply: [X] Promoter [] Beneficial Owner [X] Executive Officer [X] Director [] General and/or Managing Partner
Full Name (Last name first, if individual) Haglund, Hans
Business or Residence Address (Number and Street, City, State, Zip Code) 2244 Port of Tacoma Road, Tacoma, WA 98401
Check Box(es) that Apply: [X] Promoter [] Beneficial Owner [X] Executive Officer [X] Director [] General and/or Managing Partner
Full Name (Last name first, if individual) Ozolin, Peter
Business or Residence Address (Number and Street, City, State, Zip Code) 2244 Port of Tacoma Road, Tacoma, WA 98401
Check Box(es) that Apply: [ ] Promoter [ X ] Beneficial Owner [ ] Executive Officer [ ] Director [ ] General and/or Managing Partner
Full Name (Last name first, if individual) Imperium Renewables, Inc.
Business or Residence Address (Number and Street, City, State, Zip Code) 2244 Port of Tacoma Road, Tacoma, WA 98401
Check Box(es) that Apply: [X] Promoter [] Beneficial Owner [] Executive Officer [X] Director [] General and/or Managing Partner
Full Name (Last name first, if individual) Tobias, Martin
Business or Residence Address (Number and Street, City, State, Zip Code) 2244 Port of Tacoma Road, Tacoma, WA 98401

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

			•	•	В.	INFORM	IATION A	ABOUT O	FFERING	}			
1. Has	the issuer	sold, or de	oes the iss	uer intend	to sell, to	non-accre	dited inve	stors in this	s offering?.			Yes No	
			A	Answer als	so in Appe	ndix, Colı	ımn 2, if fi	ling under	ULOE.				
2. Wha	t is the mi	nimum in	vestment (	that will b	e accepted	from any	individua	ı?				\$50,000.00	
3. Does	the offer	ing permit	joint owr	ership of	a single ur	nit?						Yes No	
If a per or state	ssion or si son to be s, list the	milar rem listed is ar name of th	uneration associate e broker	for solicited person of the dealer.	ation of pu or agent of	rchasers i a broker o an five (5)	n connecti or dealer re persons to	on with sal egistered w be listed a	n, directly of es of secur with the SEC are associat	ities in the Cand/or w	offering.		
Full Na	me (Last	name first	, if individ	dual)					•				
Busine	ss or Resi	dence Add	iress (Nun	nber and S	Street, City	, State, Zi	p Code)						
Name o	of Associa	ted Broke	r or Deale	ः									
					Intends to		urchasers			[ ]	All States		
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
Full Na	me (Last	name first	, if individ	dual)									
Busine	ss or Resi	dence Ado	lress (Nun	nber and S	Street, City	, State, Zi	p Code)						
Name o	of Associa	ted Broke	т or Deale	r									
					Intends to		urchasers			[ ]	All States	1	
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
[IL]	[IN]	[lA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[ОН]	[OK]	[OR]	[PA]	
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
Full Na	me (Last	name first	, if indivi	dual)		·							
Busine	ss or Resi	dence Ado	iress (Nur	nber and S	Street, City	, State, Zi	p Code)						
Name o	of Associa	ted Broke	τ or Deale	r									
					Intends to		urchasers			[ ]	All States	:	
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	[1D]	
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
rrii	[SC]	(SD)	[TN]	(TX)	เบาา	[VT]	[VA]	[WA]	(WV)	rwn	[WY]	(PR)	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

# C. OFFÉRING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box " and indicate in the columns below the amounts of the securities offered for

exchange and already exchanged.		
Time of Security	Aggregate Offering Price	Amount Already
Type of Security	ė.	Sold
Debt	\$	\$
Equity	\$ <u>1,420,000.00</u>	\$ <u>1,420,000.00</u>
[ ] Common [ X ] Preferred		
Convertible Securities (including warrants)	\$	\$
Partnership Interests	\$	\$
Other (Specify).	\$	\$
Total	\$ <u>1,420,000.00</u>	\$ <u>1,420,000.00</u>
Answer also in Appendix, Column 3, if filing under ULOE.		
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
	Number	Aggregate Dollar Amount of Purchases
A ware disculation and the second	Investors	
Accredited Investors		\$ <u>1.420.000.00</u>
Non-accredited Investors		. \$
Total (for filings under Rule 504 only)		\$
Answer also in Appendix, Column 4, if filing under ULOE.		
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		
Type of offering	Type of Security	Dollar Amount Sold
Rule 505		\$
Regulation A		<u>\$</u>
Rule 504		\$
Total		<u> </u>
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
Transfer Agent's Fees	[] \$_	
Printing and Engraving Costs	[] \$	
Legal Fees	[x] <b>\$</b> _	10,000.00
Accounting Fees	[] \$	
Engineering Fees		
Sales Commissions (specify finders' fees separately)		
Other Expenses (identify)		
Total		,410,000,00
• • • • • • • • • • • • • • • • • • • •	[] 47	

Enter the difference between the aggregate offering price given in response to Part C – Question 1 and total expenses furnished in response to Part C – Question 4.a. This difference is the "adjusted gross proceeds to the issuer"......

\$<u>1,410,000.00</u>

Payments to

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.

	Officers, Directors, & Payments To Affiliates Others
Salaries and fees	[]\$[]\$
Purchase of real estate	[]\$[]\$
Purchase, rental or leasing and installation of machinery and equipment	[]\$[]\$
Construction or leasing of plant buildings and facilities	[]\$[]\$
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	[]\$[]\$
Repayment of indebtedness	[]\$[x]\$
Working capital	[]\$ [x]\$ <u>1,410,000</u>
Other (specify):	[]\$[]\$
	[]\$[]\$
Column Totals	[]\$ <u>-0-</u> [x]\$ <u>1,410,000</u>
Total Payments Listed (column totals added)	[x] \$ <u>1,410,000.00</u>

# D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type)	Signature
InVenture Chemical, Inc.	July 26, 2007
Name of Signer (Print or Type)	Title of Signer (Print of Type)
Mark Tegen	СЕО

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

**END**